

Nashville, Tennessee Year 2

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Populations of Focus:



- We plan to serve 600 individuals with Serious Mental Illness
- Sub-populations of this group include Poverty, Females, Minorities, Veterans, Immigrant/Refugee, and LGBT communities
- This population closely resembles the demographic make-up of the Davidson County population.
- The **poverty rate** for Serious Mental Illness is **4x** that of the general population. The lack of associated supports create barriers to access and use.
- Additionally, 10% more women access services than the general population.

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Implementation Practices:

Expected and Current Enrollment

- * We are currently gathering data to review the sub-populations that are engaging and those that require more outreach.
- Currently, 79% of our clients are female and 41% are African-American.

	Goal Percentage	Actual Percentage
Direct Services: Percentage to be served		
By Race/Ethnicity		
African American	32%	41%
Asian	4%	0%
White	58%	61%
Hispanic or Latino	3%	0%
Immigrant/Refugee	10%	0%
Other	10%	3%
By Gender		
Female	62%	79%
Male	38%	21%
Transgender		0%
By Military		
Active Duty	0%	0%
Veterans	5%	5%

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Data & Collection Measures

- Our goal is to decrease risk factors across all populations. Data will be reviewed based on sub-populations to determine strategies to best fit the specific population's needs.
- All members of the Integrated Care Solutions grant receive follow-up interviews. The data will be reviewed regularly with the treatment team.
- Currently, the sub-groups are being compared to each other (see table).

ENROLLMENT By Gender	Smoking	Any Alcohol Use	Average # of Risk Factors	BPS	BPD	вмі	Waist Circum- ference	со	A1c	HDL	LDL	Tri- glycerides
Male	44%	31%	6 out of 9	67%	53%	80%	80%	46%	77%	57%	31%	50%
Female	38%	13%				82%	83%	21%	66%	14%	20%	36%
By Race/Ethnicity												
Minority	42%	24%	4 out of 9	58%	45%	74%	74%	20%	77%	18%	14%	32%
Non-Minority	37%	12%	5 out of 9	55%	45%	87%	89%	31%	63%	29%	29%	44%

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Sub-Population Follow-Up

- Data from 6-month follow-up assessments (see table) are being monitored to further identify areas of need.
 Green highlighted cells show improvements from enrollment.
- Non-minorities entered the program with higher risk levels than minorities, but have improved in almost every category. Minorities have demonstrated only marginal improvement in waist circumference. This indicates that prevention- and wellness-focused services should be tailored to the specific needs of minority populations.

6-MONTH FOLLOW-UP By Gender	Smoking	Any Alcohol Use	Average # of Risk Factors	BPS	BPD	вмі	Waist Circum- ference	со
Male	60%	40%	3 out of 5	20%	60%	80%	50%	75%
Female	30%	19%	3 out of 5	62%	46%	85%	85%	17%
By Race/Ethnicity								
Minority	44%	38%	3 out of 5	73%	67%	80%	73%	21%
Non-Minority	25%	6%	3 out of 5	38%	31%	88%	87%	29%

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Successes & Looking Ahead

- We have overcome limitations of our EHR and identified areas of need.
- New procedures were implemented to include a quarterly review of our disparities statement along with current data to ensure that services are most effective.
- Disparities data will continue to be used to influence how and what services we provide.
- Strategic attempts will be made to reach out to populations that may not have been historically utilizing Centerstone services.
- ICS will work toward utilizing national and PBHCI-specific benchmarks for outcomes comparison and to guide treatment decisions.
- Future disparities reports will include information on LGBT and immigrant/refugee status.
 - While the current reports are based on aggregate group data, evaluation staff hope to provide matched pair information in future reports.

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